Chicopee Waterfront Association 4th Annual Fishing Derby

Registration Form

Name______ City ______

Junior Contestant Count of _____ which I am responsible for
The undersigned hereby releases and discharges the Chicopee Waterfront Association, the State of
Massachusetts, The City of Chicopee, and its members, officers, sponsors, and volunteers from all claims,
demands, rights of cause of action, present and future, resulting from, arising out of, or incident to, the
undersigned's participants in the said derby.

All contestants 18 years and older must register individually

Registration form must be signed by legal guardian 18 yrs of age or older for contestants 17 years and
younger

Signed _____ Date _____